

DECLARATION FOR PATENT APPLICATION

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled, *Modulating Angiogenesis*, the specification of which is filed herewith.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Patent Office all information known to me to be material to patentability as defined in 37 C.F.R. 1.56.

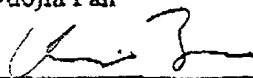
Please direct all correspondence and telephone calls to Richard Aron Osman, Ph.D., 75 Denise Drive, Hillsborough, CA 94010. Tel: (650) 343-4341; Fax: (650) 343-4342.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor:

Duoja Pan

Inventor's signature:



Date:

10/26/00

Residence:

Dallas, TX

Citizenship:

China

Post Office Address:

U.T. Southwestern Medical Center, 5323 Harry Hines Boulevard
Dallas, TX 75390-9040

Full name of second inventor:

Gerald M. Rubin

Inventor's signature:

Date:

Residence:

Berkeley, CA

Citizenship:

USA

Post Office Address:

Dept. MCB, 339 LSA, UC Berkeley, Berkeley, CA 94720-3200

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Full name of first inventor: Duoqia Pan

Inventor's signature: _____

Date: _____

Residence: Dallas, TX

Citizenship: China

Post Office Address: U.T. Southwestern Medical Center, 5323 Harry Hines Boulevard
Dallas, TX 75390-9040

Full name of second inventor: Gerald M. Rubin

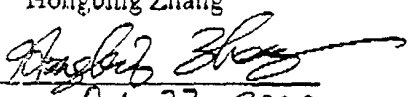
Inventor's signature: _____

Date: 26 Oct 2000

Residence: Berkeley, CA

Citizenship: USA

Post Office Address: Dept. MCB, 539 LSA, UC Berkeley, Berkeley, CA 94720-3200

Full name of third inventor: Hongbing Zhang
Inventor's signature: 
Date: Oct. 27, 2000
Residence: El Cerrito, CA
Citizenship: China
Post Office Address: 814 Lexington Avenue, #2, El Cerrito, CA 94530

2000-10-27